

U.S. APPLICATION NO. (If known) 10/568,069		INTERNATIONAL APPLICATION NO. PCT/GB04/001754		ATTORNEY DOCKET NO. P08796US00/DEJ	
The following fees have been submitted:				CALCULATIONS	PTO USE ONLY
<input type="checkbox"/> 21. Basic national fee (37 CFR 1.492(a)) \$300				\$	
<input type="checkbox"/> 22. Examination fee (37 CFR 1.492(c))				\$	
<input type="checkbox"/> Written Opinion or IPER by US indicates all claims satisfy PCT Art. 33(1-4) \$0					
<input type="checkbox"/> All other situations \$200					
<input type="checkbox"/> 23. Search fee					
<input type="checkbox"/> Written Opinion or IPER by US indicates all claims satisfy PCT Art. 33(1-4) \$0					
<input type="checkbox"/> Has been paid on the Int'l Appln. to the USPTO as ISA \$100				\$	
<input type="checkbox"/> International Search Report prepared and provided to the Office \$400					
<input type="checkbox"/> All other situations \$500					
TOTAL OF 21, 22 AND 23				\$	
<input type="checkbox"/> SIZE FEE: sheets - 100 = ÷ 50 = [rounded up] × \$250 =				\$	
<input checked="" type="checkbox"/> Surcharge of \$130 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492(e)) \$130				\$ 130	
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE		
Total Claims	- 20 =		X \$50 =	\$	
Independent Claims	- 03 =		X \$200 =	\$	
<input type="checkbox"/> Multiple Dependent Claim(s) (if applicable)			+ \$360 =	\$	
TOTAL OF ABOVE CALCULATIONS =				\$ 130	
<input type="checkbox"/> Applicant claims small entity status - 37 CFR 1.27. Fees above reduced by 1/2.				\$	
SUBTOTAL =				\$ 130	
<input type="checkbox"/> Processing fee for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492(f)) \$130				\$	
TOTAL NATIONAL FEE =				\$ 130	
<input type="checkbox"/> Fee for recording enclosed assignment (37 CFR 1.21(h)). Assignment must be accompanied by appropriate cover sheet (37 CFR 3.28, 3.31) \$40 per property				\$	
TOTAL FEES ENCLOSED =				\$ 130	
10/13/2006 ATRAN1 00000062 10568069 01 FC:161 130.00 00				Refunded	\$
				Charged	\$
<input checked="" type="checkbox"/> Payment of \$ 130 is made by attached Credit Card Payment Form (PTO-2038) <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required for this submission (except claims fees if the box below is checked) or credit any overpayment to Deposit Account No. 12-0555. <input type="checkbox"/> Do not charge any claim fees now - any additional claims fees will be paid with the Missing Requirements.					
NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.					
POWER OF ATTORNEY & CORRESPONDENCE ADDRESS: CUSTOMER NO. 00881 Date: October 10, 2006			NAME: Douglas E. Jackson REG. NO.: 28,518 Signed (for) by: <u>Douglas E. Jackson</u> REG. NO.:		

Customized FORM PTO-1390 (REV. 07-2005)

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STITES & HARBISON PLLC • 1199 North Fairfax St. • Suite 900 • Alexandria, VA 22314
 TEL: 703-739-4900 • FAX: 703-739-9577 • CUSTOMER NO. 00881
 223LT:20298:37698:1:ALEXANDRIA

Adjustment date: 11/15/2006 CBURT1
 10/13/2006 ATRAN1 00000062 10568069
 01 FC:1617 -130.00 00

Refund Ref: 0030035870
 11/15/2006

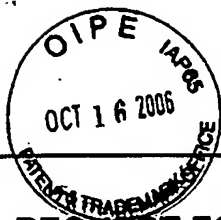
Credit Card Refund Total: \$65.00

11/15/2006 CBURT1 00000003 10568069

01 FC:2617 65.00 00

Am Exp.: XXXXXXXXXXXX1009

BEST AVAILABLE COPY



Dep & Ref

REQUEST FOR REFUND (SMALL ENTITY)	Application #	10/568,069
	Confirmation #	
	Filing Date	February 13, 2006
	First Inventor	HAYES-PANKHURST
	Art Unit	
	Examiner	
	Docket #	P08796US00/DEJ

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

S I R:

A full fee was paid in this application within the preceding three months as follows:

Amount of Fee: \$ 130.00

Date Fee Paid: 10/10/06

Purpose of Fee: SURCHARGE FOR LATE FILING OF OATH OR DECLARATION

However, Applicant was and is entitled to small entity status.

Therefore, pursuant to 37 CFR 1.28(a), it is requested that a refund of:

\$ 65.00 [50% of the above noted fee]

be **credited** (in the same manner by which the extra fee was paid) to:

☒ **American Express** Credit Card, Account Number: **3787 3903 4971 009**
(Expiration Date: 12/09; Name on Credit Card: L&T US PTO FEES; Billing Address: same as below).

☐ **Deposit Account No. 12-0555.**

It is further requested that counsel be advised of the credit, and a copy of this Request is enclosed for this purpose.

Respectfully submitted,

Date: October 16, 2006

Douglas E. Jackson
By: Douglas E. Jackson
Registration No.: 28,518

STITES & HARBISON, PLLC ♦ 1199 North Fairfax St. ♦ Suite 900 ♦ Alexandria, VA 22314
TEL: 703-739-4900 ♦ FAX: 703-739-9577 ♦ CUSTOMER NO. 00881